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ABSTRACT

More than 250 counselors, psychologists, educators and others from 50 states attended the conference. The purpose was to bring together persons responsible for rendering services to minority people in health, welfare, and educational settings. The goal was the formation of a communications network to facilitate the advancement of minorities in our society. Highlighting the four-day conference were the presentations by a number of nationally known leaders in the fields of psychology and education as they relate to minority affairs. These persons had created effective models of service delivery for educational, health, and community settings. The thought-provoking content of these presentations was discussed in small groups which also allowed participants to share their problems and individual perspectives on working with minorities and systems. This document presents a brief summary of those presentations. (Author)

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First National Conference

on

Counseling Minorities and Disadvantaged

Proceedings

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

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October 7-10, 1973

Kellogg Center for Continuing Education
Michigan State University
East Lansing, Michigan 48824

CG 010230

Sponsored by the Michigan State University College of Urban Development in cooperation with the Urban Counseling Institute, College of Education, Counseling Center and Department of Human Relations.

Preface

The First National Conference on Counseling Minorities and Disadvantaged was held at Michigan State University, October 7-10, 1973. More than two hundred and fifty counselors, psychologists, educators and others from fifty states attended the conference which was held in the Kellogg Center for Continuing Education. The purpose was to bring together persons responsible for rendering services to minority people in health welfare and educational settings. The goal was the formation of a communications network to facilitate the advancement of minorities in our society.

Specifically the conference objectives were:

1. To provide a forum for the discussion of current knowledge and practices in the delivery of counseling and related services to minority peoples. Special attention was given to new findings in the areas of mental health, training, and career development.

2. To assist personnel from educational institutions and community agencies in implementing appropriate techniques in their work with minorities.

3. To provide opportunities for interaction with minorities in order to increase understanding of their unique values, concerns and needs.

Highlighting the four day conference were the presentations by a number of nationally known leaders in the fields of psychology and education as they relate to minority affairs. These persons had created effective models of service delivery for educational, health, and community settings. The thought provoking content of these presentations was discussed in small groups which also allowed participants to share their problems and individual perspectives on working with minorities and systems.

It is hoped that the individuals who attended this conference gained a deeper understanding of the culture, problems and needs of minority peoples and an awareness of new techniques and service models which can be implemented in a variety of settings. Most important, it is hoped that this conference has strengthened our dedication to the provision of opportunities for total human development for minorities.

We are pleased to make these proceedings available to all who attended the conference and invite you to join us at our Second National Conference to be held October 27-30, 1974. Information can be obtained from the Kellogg Center for Continuing Education, Michigan State University.

Dr. Thomas Gunnings
Dr. Gloria S. Smith
Co-Chairpersons
Conference Planning Committee

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First National Conference on Counseling Minorities and Disadvantaged

October 7-10, 1973

The Kellogg Center for Continuing Education
Michigan State University
East Lansing, Michigan 48824

PROGRAM

Sunday, October 7

6:30-

6:30-8:00 p.m. Registration, Lobby, Kellogg Center

8:00 Opening Session - Auditorium

Chairman: Dr. Robert L. Green, Dean
College of Urban Development
Michigan State University

Greetings: Dr. James Hamilton, Assistant Provost
and Director of Special Programs
Michigan State University

Welcome: Dr. John Porter, Superintendent of Education,
State of Michigan

Speaker: Dr. Charles Thomas
The Challenge of Mental Health Workers in the Seventies
Professor of Psychology, Third College
University of California
San Diego, California

Announcements

Reception - Big Ten Room

Monday, October 8

8:00 a.m. Registration (continued)

9:00-10:00 General Session - Auditorium

Chairman: Dr. Gloria S. Smith,
Director of Multi-Ethnic Counseling Center

Address: Testing the Minority Student: Implications for Counseling
Dr. Robert Williams, Director of Black Studies and Professor of Psychology,
Washington University, St. Louis, Missouri

Respondent: Dr. Willie S. Williams, Executive Secretary, Minority Center, National Institute of Mental Health
Rockville, Maryland

10:30-11:30 Small Group Sessions

11:45 Lunch - Big Ten Room

Introduction of Speaker: Dr. Joseph McMillan, Assistant Vice President of University Relations and Director, Department of Human Relations,
Michigan State University

Address: A View of the Black Administrator in Non-Black Colleges and Universities: The Joy, The Agony, and The Opportunity
Walter Leonard, Assistant to the President
Harvard University

1:30 p.m. Clinics

I. Psycholinguistics
   1. Language, Cognition, and Culture
   2. Bilingual

II. Alternatives to Testing

III. New Developments in Testing

3:00 Break

3:15-5:00 Clinics repeated participants attend second Clinic

8:00 General Session -

Chairman: Dr. Alice Scales, Department of Education, University of Pittsburgh, Pittsburgh, Pennsylvania

Address: Community Mental Health Outreach Programs
Dr. Floyd Wiley, Psychologist,
Detroit, Michigan

Respondents: Stanley Vanagunas, Center for Criminal Justice, Minority Employment Opportunities
Marquette University Law School
Milwaukee, Wisconsin

PROGRAM cont.

Dr. James Jackson
Institute for Social Research
The University of Michigan

Dr. Joseph L. White
Professor of Psychology and Psychiatry
Department of Comparative Culture
University of California, Irvine

Dr. Reginald Wilson
President
Wayne County Community College
Detroit, Michigan

Tuesday, October 9

8:00 a.m. — Registration (continued)

9:00 — General Session - Auditorium

Chairman: Dr. Homer Hawkins
Department of Race and Ethnic Studies
College of Urban Development
Michigan State University

Address: Systemic Counseling: An Effective Approach to Counseling Minority Students
Dr. Thomas S. Gunnings, Assistant Dean
College of Human Medicine and Professor of Medicine and Urban and Metropolitan Studies
Michigan State University

Respondent: Dr. William Gardner
Psychology Department
Lincoln University, Lincoln, Pennsylvania

10:30-11:30 — Small Group Sessions

11:45 — Lunch - Big Ten Room

1:30 p.m. — Clinics

I. Systemic Counseling: Educational Setting

II. Systemic Counseling: Prison Setting

III. Systemic Counseling: Community Setting

3:00 p.m. — Break

3:15-5:00 p.m. — Clinics Repeated

5:30 p.m. — Banquet - Big Ten Room

Chairman: Dr. Lloyd Cofer, Consultant to the Provost, Michigan State University

Address: The Training of Urban Counselors and Mental Health Workers: A Look at the Future
Dr. Robert L. Green, Dean
College of Urban Development
Michigan State University

8:00 p.m. — General Session - Auditorium

Audio-Visual Presentations on Systemic Counseling

Presenters: Carolyn Edwards
William Powers

Doctoral Candidates in the Urban Counseling Training Program, Michigan State University

Wednesday, October 10

8:00 a.m. — Registration (continued)

9:00-10:15 — General Session - Auditorium

Chairman: Dr. Annette Kearney, Counseling Psychologist, New Brunswick, New Jersey

Address: The Role of an Effective Urban School Counselor
Dr. Wanda Green, Supervisor of Guidance,
Cleveland Public Schools, Cleveland, Ohio

Respondents: Walter Barwick, Divisional Principal
East Lansing High School

Eleanor Jones, Supervisor of Guidance, Detroit Public Schools, Detroit, Michigan

Samuel H. Johnson, Southeast Regional Director
National Scholarship Service & Fund for Negro Students
Atlanta, Georgia

10:30 — Clinics

1. Accountability/Credibility
2. Career Development
3. Community Involvement

12:30 p.m. Luncheon - Big Ten Room

Chairman: Dr. Robert Winborn, Counseling and Personnel Services, Michigan State University

Address: Retention and Challenging Minority Students
Dr. James Goodman, Senior Staff Officer,
National Academy of Science

2:00 Adjourn

General Sessions

The Challenge of Mental Health Workers in the Seventies

Dr. Charles Thomas
Professor of Psychology
University of California, San Diego

Dr. Thomas began with an overview of the current mental health approach to the treatment of black people. He pointed out that those behavioral patterns which support white dominance are reinforced, and conversely, those which do not support the white power structure are extinguished. Mental health workers are seen as reinforcing this negative view by using therapy based on anti-black values. This mental control as well as the systems physical control over blacks must be broken if change is to occur, since conformity to the white value system negates the entire black experience and leads to psychological destruction. Thus, mental health activities are a social force which can be used to provide the basis for public policy and power. Unfortunately, according to Dr. Thomas, we in mental health are particularly naive when it comes to how social power is sought, distributed and exercised. Furthermore, most of us have no conceptual framework or ideology to guide us when it comes to political consequences. Yet, it is critical that we thoroughly understand the social and political ramifications of mental health activities in order to eliminate those which have a deleterious effect on the black community. We must not only feel obligated to care for those of us who are victims of vicious processes, but work to prevent these processes from getting worse.

To meet the challenge of these issues, Dr. Thomas felt that mental health workers must become aggressively devoted to using their skills to

bring about socio-political change. The problem as he viewed it is not a lack of human resources, but a lack of commitment and action from those with skills. In the past, we have been high striving but non-visible. Now, it is essential that we become power advocates. We must take the initiative because it is sheer folly to believe that others will redefine themselves to accomodate us or yield power or create social movements to facilitate our functioning in a more personally satisfying manner.

But, political advocacy is not enough. Any mental health movement must be psychological, socio-political, and culturally nationalistic. Dr. Thomas prescribes a combined movement with a distinctive unity of purpose peculiar to the people intended to be served. It is also essential that mental health workers be involved in the decision making process in such areas as research, housing, and criminal justice. All of these activities imply the need to seek linkages with community resources in order to make institutions more reflective of relevant beliefs, attitudes, and values.

As mental health workers, our influence over the quality of life of black people is tremendous. Dr. Thomas demanded that we recognize the importance of this power and use it responsibly for our clients.

Testing the Minority Student: Implications for Counseling

Dr. Robert Williams
Director of Black Studies and Professor of Psychology
Washington University, St. Louis, Missouri

The current wave of controversy surrounding the use of psychological tests in the evaluation of minority students has reached crisis proportions. The issues which are moral, legal, ethical and educational in nature, have severe political and social implications for minority groups. A major source of conflict is the bias in test construction in that blacks have been excluded from the normative process. Dr. Williams asserted that, though separate norms have been devised for women, many experts recoil from the idea of having separate norms for blacks and whites because they accuse blacks of being separatists.

Two major questions have risen out of the testing controversy:

1. Does a given score on a white-normed test have the same behavioral meanings for white and minority populations?

2. Are patterns which deviate from the norm pathological?

In answering these questions, Dr. Williams maintained that cultural differences can and do account for the differences in response styles of blacks and whites, and consequently, affect the differences in test scores. Cultural differences in the definition of acceptable behavior also influence the interpretation of test results.

Another facet of the testing controversy centers on the purposes of intelligence tests. According to Dr. Williams, one of the most fallacious assumptions is that a test can measure aptitude or intelligence. In truth, psychologists have not even been able to concur on one definition of the

concept of intelligence. All tests are really measures of achievement. That is, they measure the opportunity one has had to learn and how much one has profited from past experiences. The items on many widely used tests are not representative of the range of human abilities, skills and knowledge possessed by any given individual. More important, the kinds of abilities developed early in minority populations are not those which are assessed on traditional ability tests. For minority children have developed as many specific human abilities as early in life as any other ethnic group. However, these abilities are related to his unique background experiences. These differences do not mean that the minority child is deficient or that he lacks the capacity to develop other abilities. The truth is that his background has prepared him for independence and survival, rather than for classroom activities. Hence, a survival quotient based on abilities developed by minority children may be a better indicator of ability than I.Q. tests.

Along these lines, Dr. Williams has devised three instruments which relate to the black experience:

The Black Intelligence Test of Cultural Homogeneity (BITCH) has served to underline the philosophy that if a person can learn in one culture, he has the ability to learn in another. Standardized on both blacks and whites, the BITCH Test demonstrated that blacks can do well on tests if they are related to the black experience.

The Themes Concerning Blacks (TCB) Test is a fifteen-card set depicting black people which attempts to find out whether black children are able to give more creative stories indicative of their ability and whether they are able to give longer stories to the TCB Test than to the Thematic Apperception Test (TAT).

The third instrument is the Williams Awareness Sentence Completion Test (WASC) which was designed to measure the development of black identity and personality. Dr. Williams proposed that in addition to normal personality development, black youth develop a major black identity component which serves as a moderator of other personality features. He proposed a stage theory of black personality development. The WASC and a biographical inventory are preliminary measures currently in use.

On a national level attempts have been made to effect a moratorium on testing. National organizations such as APA and APGA have responded to this request by passing resolutions to explore the situation further or by implying that the problem is with the test user, not the test itself. Dr. Williams contended that this response is reflective of the central role measurement is seen as having in society. In 1973, the Association of Black Psychologists took a more decisive step by adopting a resolution calling for a moratorium on testing of blacks until more culturally relevant tests are developed. Dr. Williams recommended that community people join in this movement by initiating class action suits against school boards and departments of education to halt this abuse and dehumanization of black people.

Respondents

Dr. Willie Williams
Executive Secretary, Minority Center
National Institute of Mental Health

Dr. Williams reinforced the consequences suffered by minority children as a result of the cultural bias in test construction. He used as an example the practice of mass screening. Obstensibly, the purpose of mass screenings of infants and young children is to protect them from becoming developmentaly disable while they are very young. The screening is performed at early ages because young children are most amenable to treatment and rehabilitation. However, Dr. Williams warned that mass screening is, in actuality, a program that identified various aspects of the lives of children from poor families. Once identified, the test results label the child and he is then "tracked" in a specific educational curriculum. This results in emotional damage, as well as negative economic consequences, for labeling or tracking prevents a child from branching out into other educational programs and occupational opportunities. Dr. Williams called the entire process educational genocide.

Horace Mitchell
Doctoral Candidate
Washington University, St. Louis, Missouri

Mr. Mitchell focused on the continued use of white oriented tests by minority mental health workers and educators. In his opinion, these tests

only result in a deficit conceptualization of minority people. Thus, he agreed that it is essential to take steps to change the testing procedures. However, in the meantime, educational institutions should be required to obtain written permission in order to administer standardized tests to children. Along with the test permission requests, parents should also receive explanations why the test is being given, the nature of the test, what the results are expected to demonstrate, and how those results will affect the education of the child.

Thus, he saw the understanding of the effects and implications of using standardized psychological testing with minority people as crucial to parents as well as educators and mental health workers.

Community Mental Health Outreach Programs

Dr. Floyd Wiley
Psychologist
Detroit, Michigan

Dr. Wiley spoke on the subject of delivering mental health service in the community. As an example, he related his experiences in working with a group of farm migrants who traveled from Florida to New York seeking employment. He pointed out that their major problems were not physical but related to their undereducation, exploitation and dehumanization. Yet, in spite of these conditions, he found that the general level of mental health among these people was not as poor as might have been expected.

Turning to another topic, Dr. Wiley noted the "research ripoff" which has prevailed in the black community. This research has traditionally not been relevant to black peoples' needs or encouraged their active participation. However, it was noted that there is now an increasing amount of community resistance to such research, which has resulted in increased community involvement in studies on and about them.

A final area of concern for Dr. Wiley was the emphasis being placed on the use of theoretical models in outreach activities. In his viewpoint, one of the biggest fallacies in the mental health field is that one has to develop models, strategies, and tactics for entry into the community. In reality, fixed models are not effective, while model building and theorizing without taking into account the conditions in the community inevitably leads to failure. As an alternative to this approach, Dr. Wiley suggested that mental health workers enter into a partnership with

community residents, sharing knowledge, concerns, and experiences. This unity of client and worker should be the framework for the development of effective service delivery models.

Respondents

Dr. Joseph L. White
Professor of Psychology and Psychiatry
University of California, Irvine

Dr. White focused on appropiate strategies for delivering services to minorities. First, he recommended flexible scheduling, including sessions of different lengths (only when needed) and flexible staffing patterns. Second, he called for a de-emphasis on the pathology in urban communities suggesting that mental health personnel identify the strengths in the community and employ those residents with skills to foster community self-help. In the area of training, he pointed to the need to develop active change agents who will move the system. He reminded us that the counselor must not only be able to assist the client with basic survival needs, but must also understand the politics of the community. More important, he must know how to get its leaders to facilitate institutional response to stated needs.

Dr. White closed with his definition of mental health for blacks - Having a range of options - economic, political, interpersonal, occupational - and strategies to actualize these options.

Dr. Reginald Wilson
President, Wayne County Community College
Detroit, Michigan

Dr. Wilson stressed the need for mental health workers to do more than talk about increasing the effectiveness of service delivery. According to him, we must develop a political perspective as a framework

for our strategies. An examination of the basic concepts of psychology and counseling makes clear that even the most progressive model for change agents in mental health is based on the concept of rehabilitation. In other words, the turning out of crazy folks is a natural by-product of society and it is the responsibility of mental health workers to put them back together. This theory, of course, ignores the possibility of creating a healthy society. Dr. Wilson suggested that in response to this situation, we make political decisions to change this process of human development. We must go beyond creating better rehabilitation models and advocate ways of preventing mental illness.

Systemic Counseling: An Effective Approach to Counseling Minority Students

Dr. Thomas Gunnings
Assistant Dean, College of Human Medicine
Professor of Urban and Metropolitan Studies
Michigan State University, East Lansing

Traditional counseling approaches attribute the client's problem to one of three sources: the individual; his family; or his environment. Subsequent treatment involves teaching the client to cope with or adjust to the status quo. This traditional approach to counseling, however, does not treat the basic cause of most disadvantaged youth's problems - it tends only to treat the symptoms. In Dr. Gunnings' opinion, it is the society in which we live that elicits deviant behavior in these individuals, and therefore, we must seek ways to change or modify society through counseling.

The systemic model is based on the assumption that most of the problems that have previously been labled client problems are in actuality system problems. The focus of this approach, then, is to treat the system for its problems, thereby bringing about changed individuals and systems. Thus, in comparing the systemic approach to traditional counseling models, we see that it is problem rather than client oriented; focuses on causation rather than symptoms, and works with both the system and the client as opposed to just the individual.

Dr. Gunnings offered guidelines for the school counselor who operates using the systemic model. First, the systemic counselor must be knowledgeable about human behavior, the resources of the community, and the operations of the systems (including the school) that impinge on his students.

Second, he must share this knowledge with teaching personnel to assure relevant course content, open course selection and appropiate testing instruments. This will assure the students' preparation for higher education. When needed, he must help design alternative educational systems for those who fail to complete public school. In other words, the counselor must be a student advocate in every sense of the word. This includes becoming a positive role model for students, many of whom may have little other contact with dedicated, supportive minority professionals.

In summary, the systemic approach offers the counselor an alternative approach to problem solving with clients. This model of counseling advocates eliminating the causes of behavioral symptoms through systems modification.

Respondents

Dr. William E. Gardner
Psychology Department
Lincoln University, Lincoln, Pennsylvania

Dr. Gardner detailed appropiate methods for implementing the systemic model of counseling. In relation to clients, he focused on their need to learn intervention skills for future problem solution. Two types of skills were discussed: information-gathering skills (i.e. the identification and utilization of materials and resources), and negotiative and manipulative skills. Informational skills were related to academic achievement for students while negotiative-manipulative skills were seen as critical for successful bargaining with and alteration of the systems in our environment.

Turning to the counselor, Dr. Gardner explained that in order to implement the systemic approach, they must first adapt values and beliefs that facilitate appropiate self and group management. These values included realizing the inherent worth of the client as an individual, and maintaining a sense of responsibility for accountability to the individual and to minority people in general.

Mr. Jim Shores
Counselor
Washburn University, Topeka, Kansas

Mr. Shores used his personal experiences to illustrate how a person victimized by the system can effectively use the systemic approach.

Mr. Shores, who has a multi-racial background and was imprisoned at a young age, refused to let the system defeat him. Instead, operating systemically, he forced the system to work for him. Counseling motivated him to take advantage of educational opportunities while still in prison. Today, Mr. Shores is a counselor at a major university.

The Role of an Effective Urban School Counselor

Dr. Wanda Green
Supervisor of Guidance, Cleveland Public Schools
Cleveland, Ohio

Dr. Green stated that schools should assist students in developing the skills needed to cope with this world. Maintaining that a counselor is a teacher, with guidance as the focal point for pupil development, she challenged counselors to find ways of facilitating the learning process for students. A counselor should make it his responsibility to teach and translate data and behavior about the world we live in, so that the child can understand himself and his relationship to others.

According to Dr. Green's observations, there are various non-motivating forces in existence in the large urban school setting. One disturbing factor is that children are often punished for non-acceptable behavior before they are actually taught what behavior is appropriate. Similarly, there is a widespread belief that students do not need any type of orientation classes, guidance handbooks or programs presenting the school's traditions. Instead, it is assumed that children already know what is expected of them when they arrive. One of the most distressing behavior patterns exhibited by the professional staff in many urban schools is the expectation of non-learning behavior from the students and the acceptance of such non-learning behavior when it is obtained.

Dr. Green asserted that all children can learn. She felt that, in the urban setting where large numbers of poor people populate our schools, we should focus professional attention on developing the kind of human

beings that can be helped to find their way out of the morass of non-learning, discouraging, non-achieving patterns. In her opinion, it is the counselor's specific responsibility to find the channel or channels of learning that the child is using to learn. In other words, the counselor should seek new ways to make the educational setting more compatible with the growth needs of children.

Dr. Green shared her model of the kind of individual she strives to develop in the educational setting: a strong, independent, capable child, who can read, write, and figure sufficiently well enough to make choices about himself and his environment. To achieve this educational goal, the counselor should include children in the seeking-searching-planning process that makes learning possible, rather than attempting to "impose knowledge" on them.

Other specific suggestions made by Dr. Green included ways to broaden the aspirational levels of minority children and ways of utilizing the cultural resources in the urban setting. She pointed out that racial and social isolation eliminates from the experiential life of the majority of urban children knowledge of the occupational world at the managerial, executive-leadership-technicians level. Guidance counselors can devise ways of providing appropriate role models for the students by utilizing the rich assets and raw materials of the urban community.

Finally, Dr. Green encouraged counselors to develop a working philosophy of life and reminded us that the real issue is whether or not our presence makes a positive difference in the life of the children with whom we work.

Respondents

Mr. Walter Barwick
Divisional Principal, East Lansing High School
East Lansing, Michigan

Expanding on the concept of involvement, Mr. Barwick reminded us that to be effective counselors we must leave our offices and seek out students with problems, assess the relevancy of classroom activities, and become involved in the decisions affecting the school. He stressed the role of advocacy and gave several examples of how counselors can help develop human potential. Most important, he reminded us that if we produce defective products, we cannot, like the automobile plants, recall the model. He challenged us to accept the responsibility for improving our urban community by expanding the opportunities for its residents.

Ms. Eleanor Jones
Supervisor of Guidance, Public School System
Detroit, Michigan

Ms. Jones also alluded to the problem of counselor inaccessibility, advising counselors to increase their visibility in the community. This was seen as a prerequisite for an understanding of the students' culture and the recognition of their dignity and worth as individuals. Ms. Jones went on to detail the attitudinal qualities that counselors of minorities should possess. These included sensitivity, objectivity, flexibility,

sincerity and openmindedness. She acknowledged that the situation is improving (i.e. increasing minorities in college and declining drop-out rates) and attributed this change to the new breed of counselor who is informed and dedicated to change.

Mr. Samuel Johnson
Southeast Regional Director
National Scholarship Service and Fund for Negro Students
Atlanta, Georgia

Mr. Johnson related the issues and concerns of the urban counselors to counselors in rural settings, highlighting the similarities and differences in needs and concerns. In addition, he furnished the audience with a description of the four models of career education and their implications for counseling minority students in urban and rural settings. He was very informative about current educational legislation and procedures and outlined suggestions for funding special services programs.

Luncheon and Banquet Addresses

A View of the Black Administrator in Non-Black Colleges and Universities: The Joy, The Agony, and The Opportunity

Walter Leonard
Special Assistant to the President
Harvard University

Too many people expect too many things from the black administrator in higher education; particularly in white controlled institutions. At the same time, however, not many people know very much about these men and women who are expected to be super persons. The first phenomenom - the enormous expectation - arises in large part from the second phenomenom - a serious lack of information. This lack of data is both a disadvantage and blessing. A disadvantage in preparing this paper, a blessing in that it precludes a negative "press image" or stereotyping of these persons. However, this freedom of stereotype does not exclude the black administrator from other problems.

The recruitment of black and other minority-group administrators by white-higher learning institutions came as a response to the needs, wants, and demands of minority students attending non-black universities. However, many black administrators assumed positions on white campuses only to discover that they had no power to make their roles effective. Working in such an environment, the black administrator often is forced into one of two alternative roles. First, the black administrator may become the sole keeper of minority affairs to the exclusion of other burning issues in today's academic revolution---or evolution. Second, the black administrator may nearly abandon his minority group status in favor of becoming a carbon copy of his white colleagues, or an

"afro-saxon." Either position prevents the black administrator from functioning effectively and he must be very careful to avoid these pitfalls.

The black administrator must also guard against the second phenomenon - the often conflicting expectation of black students, faculty members, other administrators, and alumni groups. A major problem is the expectations of students. In contrast to white students who seem to have no preconceived expectations, the black students expect black administrators to be all or one of the following: friends, guidance counselors, academic advisors, job references, mentors, spokesmen, companions, clergymen, clerk, as well as boosters in times of trouble and congratulators in times of success. Counseling is seen as a major part of students' expectations. This is particularly significant since studies have shown that students do not want faculty advising; thus, the administrator, particularly the black administrator, is swamped. The question Attorney Leonard discussed is how can black administrators cope with these expectations in addition to already overburdened schedules; particularly when there are few if any alternative places to refer students. He answered that the solution must include attempts to correct the situation that deprives black students of aid, support, and hospitality within an alien atmosphere - real or imaginary.

Still, the black administrator is faced with the expectations of at least three other groups. The administration and other faculty members may expect him to sell their viewpoints to black students. Alumni, on the other hand, may see the black administrator as competent only to deal with minority student affairs. To quote Thomas Sowell, an economist, "Few people are caught in the middle as much as black administrators, particularly if they are sincere in wanting to help black people and sincere in their work for the university."

Attorney Leonard enumerated some of the things black administrators can do to resolve these conflicts. They must not compromise their integrity or become appendages. At the same time, they must demand respect, take their titles seriously and insist on the institutionalization of changes that provide equal opportunity for minority students. Finally, the black administrator, student, and faculty member must take for granted that the rise of black people into the educational, economic, political, industrial and social structures which govern society, is in the best interests of the whole world.

The Training of Urban Counselors and Mental Workers: A Look at the Future

Dr. Robert L. Green
Dean, College of Urban Development
Michigan State University, East Lansing

Dr. Green emphasized that students in any graduate program with a social science base cannot be trained in a vacuum. Their training must achnowledge trends in the broader society. In other words, theory must be related to practice or students run the risk of becoming detached, neutral scholars. This objective, uninvolved scholar role has never been very practical, indeed it has never been attained by any social scientist. More important, it is difficult if not impossible for the minority counselor to obtain such; particularly when many segments of our educational system engage in practices that are non-neutral.

We must struggle to utilize social science tools in a very fair manner, but the identification of the problem to be addressed will relate to our immediate concerns. Blacks, Chicanos, and American Indians who are being trained as counselors have a vast experiential background which they can relate to their training. Thus, we cannot and should not divorce their training from their day-to-day problems.

Therefore, those who are responsible for graduate counselor training must structure such programs to relate theories and research to the critical social, political and economic problems that confront the urban poor and minorities. For example, counseling students must be cognizant of the fact that the present welfare system discourages work and tends to destroy the family unit by reducing payments when

parents earn money or when the father lives with the family. Similarly, counseling students must be made aware of the problems of public health care, housing, and the judicial system. Public hospitals and clinics are usually overcrowded, understaffed, badly maintained, have little financial support, and have little sensitivity to the personal comfort, convenience, or feelings of the poor.

On the other hand, our legal system fosters hopelessness and urban housing for minorities remains limited and in many cases, substandard. These students must also realize that the place of minorities in the economy is one of owning little and working at the lowest paying jobs, which tend to be highly expendable in times of tight money.

With an understanding of such necessary background information, students will be able to take a stand and become effective mediators and change agents in the urban communities where they serve as counselors. In fact, advocacy should become the code word in the training of counselors. Counselors must use their knowledge and positions to become witnesses for and supporters of those who are poor and at a disadvantage in our society.

Retention and Challenging Minority Students

Dr. James Goodman
Senior Staff Officer, National Academy of Science
Washington D.C.

In the past few years, the minority revolution has finally reached major institutions of higher education, demanding social reform and changes in academic objectives. These demands have focused primarily on minority inclusion in university decision making processes, curriculum changes that reflect the contributions of minority Americans, and an increase in minority faculty and students. The demand which has caused the greatest concern among administrators is the insistence on increased minority admissions. Some universities have increased recruitment efforts waiving traditional admissions criteria; while other colleges have simply ignored this demand. The concern appears to be how to meet the needs of high risk students with traditional resources.

In speaking to this issue, Dr. Goodman quoted from several studies which illustrated that the high risk student could survive if given proper tutorial, counseling and other cultural supportive services. Such services, he pointed out, should be viewed as part of the institution's educational methodology and must provide minorities with the opportunity to develop ethnic pride and awareness and a positive self identity. Those developing appropriate support programs must also recognize several other factors. First, minority students are a diverse group and institutions must be prepared to respond to the range of attitudinal and behavioral models presented. Second, diverse perceptions of the nature of the problem often removes a common basis for the

development of mutual trust and respect. Third, since many minority students plan to take their skills back to their communities, they need appropriate minority role models. Fourth, the education of minorities must include a service component in conjunction with the more cognative aspects of their education.

To deal with these possible impediments to quality education for minorities; Dr. Goodman proposed the development of urban racial awareness training centers. These centers would train faculty, students and community residents to deal with the conflicts surrounding interracial encounters as well as research other causes of dysfunctional approaches to problems in urban education. It was further suggested that in view of the limited experiences that institutions of higher education have had with large numbers of minority students, the cost of their education and the appropriate allocation of resources should also be studied. The final issue Dr. Goodman mentioned was institutional racism. He specified its debilitating effects and suggested that there is no place for such attitudes and behavior in a truly viable educational system.

Additional Conference Activities

Other Conference Activities

In addition to the general sessions, there were activities such as informal question-answer sessions and small group discussions focusing on such topics as psycholinguistics; new developments in testing; the application of the systemic counseling model; counselor accountability and credibility; career development; community involvement. The attendance at the small group sessions reflected the enthusiasm and interest of conference participants in learning about new developments in the field.

Highlighting these activities was an audio-visual presentation by doctoral students in the Urban Counseling Institute at M.S.U. This presentation, which was produced by one of the students, William Powers, focused on the use of media in counseling and the training of counselors. The application of the systemic counseling model for intervention and systems modification was also demonstrated. The uniqueness of this approach generated many comments from the audience.

Closing Remarks

Dr. Gloria S. Smith
Assistant Director Counseling Center
Michigan State University

Dr. Smith urged the conferees to accept the challenge to mental health workers as outlined by Dr. Charles Thomas. She pointed out that the exchange of ideas during the four day conference was invaluable, but the conference's success depended on the extent to which the knowledge gained was used to effect positive changes in the minority community.

To effect change, it was suggested that we sharpen our skills and reaffirm our commitment to systems intervention. Self actualization, focusing on the development of a positive self concept was seen as the key to minority advancement and we were reminded of the tremendous influence that we as helping professionals have on our clients' ego development. The conferees were thus advised to provide direct and indirect services necessary to insure the maximization of human potential.

Dr. Smith closed the conference with this provocative quote:

> . . . Who am I: I'm a human being. I have the same hopes that you have, the same fears, same drives, same desires, same concerns, and same abilities. I want the same chance that you have to be an individual. Who am I: In reality, I am who you want me to be.